

Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Grimmell College

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 1115 8th Avenue, Grimmell, IA 50112

Name of Agent Designated to Receive
Notification of Claimed Infringement: William Francis

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Computer Services, Grimmell College, Grimmell, IA 50112

Telephone Number of Designated Agent: 515.269.4901

Facsimile Number of Designated Agent: 515.269.4936

Email Address of Designated Agent: copyright@grinnell.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: _____

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 10/1/99

Typed or Printed Name and Title: William Francis, Director of Computer Services

Note: This Amended Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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RECEIVED

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